

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

UnitedHealth Group Incorporated PAC (United for Health)

Full Name (Last, First, Middle Initial)

A. DEBRA K BURNAM

Mailing Address 740 VORTEX AVE

City
HENDERSON

State Zip Code
NV 89002-6514

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southwest Medical Assoc. Inc.

Occupation

Dir Clin Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : PR2575076235271

Amount of Each Receipt this Period

45.81

P/R Deduction (\$15.27 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. VINCENT PETER VALLARIO

Mailing Address 240 LEXINGTON ROAD

City
GLASTONBURY

State Zip Code
CT 06033-4342

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Mkt Group CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.21

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : PR2575096635271

Amount of Each Receipt this Period

379.46

P/R Deduction (\$316.96 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GLEN J GOLEMI

Mailing Address 1214 MAGNOLIA ALY

City
MANDEVILLE

State Zip Code
LA 70471-3068

FEC ID number of contributing
federal political committee.

C

Name of Employer

United HealthCare Services Inc

Occupation

Hlth Plan CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : PR2575098835271

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

540.65